Application	or Docket	Numbe
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PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL ENTITY TYPE			OTHER THAN			
TOTAL CLAIMS			liv	,	(0010		1	RATE		OR T		ENTITY
FOR .					ED EVIDA		BASIC FE	FEE	\exists	RATE	FEE	
-			10 mi			ER EXTRA		DASIC FE	385.00	OR	BASIC FEE	770.00
	JIAL CHARGE	ABLE CLAIMS	10 mi	<i>U</i> minus 20= *			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS minus 3 =						X43=	· .	OR	X86=			
MULTIPLE DEPENDENT CLAIM PRESENT						+145=		OR				
* If the difference in column 1 is less than zero, enter "0" in column 2						TOTAL	+	OR	TOTAL	סרר		
	CLAIMS AS AMENDED - PART II								<u> </u>	ال	OTHER	
		(Column 1)		(Column	2)	(Column 3)		SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUS PAID FOR	} LY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	* ENTATION OF M	Minus	HAR CI		=		X43=		OR	X86=	
L	TINOTPHESI	-INTALION OF MI	JLIIPLE DEI	PENDENT CL	AIM			+145=	·	OR	+290=	
							L	TOTAL			TOTAL	
		(Column 1)		(Column 2	2)	(Column 3)	A	DDIT. FEE	L	J - · · ·	ADDIT. FEE	
В		CLAIMS REMAINING		HIGHEST NUMBER		PRESENT	Г		ADDI-	1		ADDI-
AMENDMENT B		AFTER AMENDMENT		PREVIOUS PAID FOR	LY	EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
N	Total	*	Minus	**	\Box	=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X43= ·	·	OR	X86=	
_	FIRST PRESE	NTATION OF ML	LTIPLE DEP	ENDENT CLA	AIM		H					
•							L	+145=		OR	+290=	
							. AE	TOTAL DDIT. FEE		OR ,	TOTAL ODIT. FEE	
		(Column 1)		(Column 2) (Column 3)		•	. •	•		٠.
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	-	HIGHEST NUMBER PREVIOUSL' PAID FOR		PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	41	-	· .		X\$ 9=		OR	X\$18=	
	Independent		Minus	***		=		X43=			X86=	
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-	//		OR	^00=	
+145= OR +290=												
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."								OR A	TOTAL DDIT, FEE			
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE												